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CONFIRMATION NO. 4473

SERIAL NUMBER 10/031,037	FILING DATE 05/13/2002 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. A0000102-01-SMH
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** CONTINUING DATA *****

This application is a 371 of PCT/US00/18345 07/05/2000 *SM*** FOREIGN APPLICATIONS ***** *↑ SM*

UNITED STATES OF AMERICA 60/144418 07/16/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	MI	8	32	1

ADDRESS

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TITLE

Method for treating chronic pain using mek inhibitors

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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RECEIVED 1436	No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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